ENTRY BLANK



PLEASE TYPE OR PRINT	Entered previous May Show			
Ms. Mr. Artist EDWARD	yes no CAROME (Last Name Last)			
Permanent 1547 50, 6 Address Street South	Relugir Blud Euchdoin OH			
441.21 Tel. (216) L. Zip Area Code	191-4301			
Zip Area Code				
Temporary Address				
Street	City			
Tel. ()				
Zip Area Code				
Permanent address is in what county?	Cuyahoga			
Born in Cuyahoga County Yes	□ No			
Collaborator None (If Any)				
If May Show entries are not accepted	or not sold:			
Artist will pick up at Museum.				
☐ Museum should dispose of.				
☐ Museum should ship to artist C.O	.D. at this address:			

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

If bubble appears, turn piece over and allow it to flow into bottom chamber.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until January 2, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Rdward Caroni

ENTRY BLAN	IKS				
☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography ☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts					
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GRAPHICS AND PHOTOGRAPHY ONLY					
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DO NOT WI	RITE IN THIS SECTION	A	CCEPTED	REJECTED	
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